# Academic Agreement

Name: ___________________________  
Student ID: _________________________

Email: ____________________________  
Student Cell Phone: __________________

Major/Department: ____________________  
Returning from Reinstatement □ yes □ no

Classification (circle one): Freshman / Sophomore / Junior / Senior

Current Cumulative GPA: ____________  
Previous Semester GPA: ____________

## Recommendations for Academic Success

(complete this section with your academic advisor)

- □ Writing Center 209C Library 620-341-5380
- □ Reading and Academic Laboratory 222 Visser 620-341-5495
- □ Student Wellness/Biofeedback/Disability Services  
  250 S Morse Hall 620-341-5222
- □ Career Services 050 Memorial Union 620-341-5407
- □ Veterans’ Services 205 Plumb Hall 620-341-5267
- □ CW130C Recharge & Reflect Course (1cr hr)
- □ Tutoring:
- □ Other:

## Course(s) to Retake

(complete this section with your academic advisor)

## Academic Tools/Resources

<table>
<thead>
<tr>
<th>Learning Style Inventory</th>
<th>Date: ____________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Score: ____________</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Study Skills Inventory</th>
<th>Date: ____________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Score: ____________</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Academic Prob. Workshop</th>
<th>Date: ____________</th>
</tr>
</thead>
</table>

Semester: _____year  
Fall / Spring / Summer
Self-Assessment

Name: ___________________ ESU ID#___________________

Academic Advisor: __________________________________________

Complete each of the following statements:

1. I go to professor office hours and/or seek help from professors…
   _____never   _____occasionally   _____often   _____very often

2. Last semester I met with my academic advisor…
   _____never   _____once   _____twice   _____three or more times

3. Per week, I work a full or part-time job…
   _____I do not have a job   _____10 hrs or less   _____11-20 hrs   _____21-30 hrs
   _____Full time

4. Per week, I study outside of class…
   _____10 hrs or less   _____11-20 hrs   _____21-30 hrs   _____31-40 hrs

5. I feel overwhelmed…
   _____never   _____occasionally   _____often   _____very often

6. I feel lonely or isolate…
   _____never   _____occasionally   _____often   _____very often

7. I know at least one concerned individual on campus (advisor, counselor, mentor, professor) I can go to if I need help.
   _____Strongly Disagree   _____Disagree   _____Agree   _____Strongly Agree

8. Describe one class or assignment in which you were successful last semester. Why were you successful?

9. What class(es) did you enjoy last semester?

<table>
<thead>
<tr>
<th>Circle your level of agreement with the following statements:</th>
<th>Do not Agree</th>
<th>Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>I attend class regularly</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I get a copy of the notes on days I miss class</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I turn in all of my assignments on time</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I use the syllabus as a guide for each of my courses</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I use a planner/calendar on a regular basis</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
<tr>
<td>I have support from family and/or friends to complete my college degree</td>
<td>1 2 3 4 5</td>
<td></td>
</tr>
</tbody>
</table>
A) In what areas below do you think you need assistance? Indicate all that are appropriate.

- study skills
- math skills
- choosing a major
- time management
- lifestyle change
- stress management
- dealing with personal issues
- writing skills
- test anxiety
- test-taking skills
- career exploration
- dealing with chemical dependency
- other (please list)_______________________________________________

B) What plans do you have to improve your academic standing?


University Requirements

1) A student who is placed on academic probation and achieves a 2.00 GPA the following semester will be continued on probation if the required CGPA is not achieved.

2) If the required CGPA for good scholastic standing is met, the student will be removed from probation.

3) By signing below, I understand that I grant permission to the department(s) under the Recommendations section of this contract to report my attendance only to the Director or Assistant Director of the Student Advising Center.

____________________________________
Academic Advisor’s Signature / Date

____________________________________
Student’s Signature / Date